POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Sm	279	01-29-01
RESPONSE FORMALITY REVIEW	HC	712	09-17-01

INDEX OF CLAIMS

✔	Rejected	N	Non-elected
=	Allowed	I	Interference
− (Through numeral)	Canceled	A	Appeal
÷	Restricted	0	Objected

Claim		Date	Claim		Date	Claim		Date
Final	Original		Final	Original		Final	Original	
				51			101	
				52			102	
				53			103	
				54			104	
				55			105	
				56			106	
				57			107	
				58			108	
				59			109	
				60			110	
				61			111	
				62			112	
				63			113	
				64			114	
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				68			118	
				69			119	
				70			120	
				71			121	
				72			122	
				73			123	
				74			124	
25				75			125	
26				76			126	
27				77			127	
28				78			128	
29				79			129	
30				80			130	
31				81			131	
32				82			132	
33				83			133	
34				84			134	
35				85			135	
36				86			136	
37				87			137	
38				88			138	
39				89			139	
40				90			140	
41				91			141	
42				92			142	
43				93			143	
44				94			144	
45				95			145	
46				96			146	
47				97			147	
48				98			148	
49				99			149	
50				100			150	

If more than 150 claims or 10 actions
staple additional sheet here

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